

# **HEALTH AND HUMAN SERVICES CAPITAL IMPROVEMENT PROGRAM**

## **Introduction to Program, Goals, and Highlights**

The Health and Human Services Capital Improvement Program supports facility and technology capital projects to enhance King County health and human service delivery. The goals of capital projects under this program are:

- To maintain the structural integrity and efficiency of all county-owned public health facilities
- To respond to increased need for public health services through timely remodeling and construction
- To assure that the configuration of program and support space maximizes the effectiveness of service delivery

The Health and Human Services Capital Program is divided into two categories: Harborview Medical Center and Other County Health and Human Services technology and facilities.

## **Harborview Medical Center Capital Program**

The purpose of the Harborview Medical Center (HMC) capital program is to address long term strategic needs, as well as near term operational needs. Projects contained in the six year CIP promote the quality of patient care at Harborview, enhance Harborview's ability to provide care to priority patients, increase the functionality of the facility and address the sustainable, long term usefulness of Harborview's physical plant.

Harborview Medical Center's 2006 capital program of \$4.9 million is consistent with its mission and the Major Institution Master Plan (MIMP). The 2006 annual capital program reflects the medical center's priorities to correct life/safety problems, address clinical and patient needs, and improve operational efficiency. The Health Capital Improvement Program also includes funding for joint oversight of Harborview and King County in support of the Harborview Medical Center Bond Program. The HMC Bond Program is the result of voter approval in 2000, authorizing King County to make seismic, health, and public safety improvements at Harborview Hospital funded with voter approved bonds. The improvements included demolition of unsound buildings, construction of new buildings and renovation and upgrading of existing facilities.

## **Project Prioritization Methodology**

HMC develops its Capital Improvement Program based upon its mission, the MIMP, and the requirements of state and federal health care regulatory agencies. The Harborview Board of Trustees makes final prioritization and approval of Harborview Medical Center's Capital Improvement Program. Projects meet the criteria approved by the HMC Board of Trustees to address: (1) life safety or regulatory issues. (2) essential patient care or (3) facilitate the implementation of Harborview's strategic plan and major institutional master plan.

## **Financial Planning and Policy Overview**

The current HMC capital plan is consistent with the MIMP, the supporting Operational Master Plan, and the voter-approved bond measure of September 2000.

Harborview Medical Center retains depreciation reserves annually to fund most of its maintenance capital requirements. HMC also receives some state and federal grant moneys which may be earmarked for specific capital projects or types of capital projects. HMC is increasingly involved in fund raising activities to subsidize various HMC programs, including its ongoing capital requirements. The University of Washington, as the contractual manager of HMC, on occasion supplies resources/capital to fund various projects which support the teaching function of the Medical Center and/or enhance its facilities in order to continue to attract a high level of faculty and physicians as part of the HMC staff.

## **2006 Significant Project Highlights**

This program includes necessary improvements at Harborview Medical Center. Harborview's \$4.9 million in projects implements the medical center's priorities to correct life/safety issues, address clinical and patient needs, and improve operational efficiency. Projects contained in the capital improvement program also address long term strategic needs, as well as near-term operational needs. The projects promote the quality of patient care at Harborview, enhance Harborview's ability to provide care to priority patients, increase the functionality of the facility and address the sustainable, long term usefulness of Harborview's physical plant.

The following table displays the major Harborview Medical Center projects in the 2006 Executive Proposed Budget:

<b>Significant Projects Harborview Medical Center Capital Improvement Program</b>	<b>2006 Executive Proposed Budget</b>	<b>Continuation of Existing Project</b>
HMC Miscellaneous Projects Under \$50,000	\$600,000	X
HMC Fixed Equipment	\$1,654,273	X
2 <sup>nd</sup> MRI	\$205,000	
GEJ Gamma Knife Support Spaces	\$300,000	
Inpatient Floor Upgrades	\$600,000	
Instrument Washer	\$205,000	

## **Department of Public Health and Department of Community and Human Services Capital Programs**

The 2006 capital projects for the King County Department of Public Health (DPH) and Department of Community and Human Services (DCHS) are shown in the table below. The DCHS technology capital projects total \$283,374. The Health Department facility capital projects total \$81,178.

Agency	Project Name	2006 Executive Proposed Budget	Continuation of Existing Project
<b>Technology</b>			
Veterans Services	Veterans Information System	118,975	X
DCHS Administration	Data Integration	164,399	
<b>Facilities</b>			
Health	Eastgate Lab Ventilation	29,090	
Health	North Public Health Emergency Lighting	52,088	
<b>Totals</b>			
Technology Projects		283,374	
Facilities Projects		81,178	
Total		364,552	

## 2006 Technology Project Highlights

### Transition Fund Project:

#### **DCHS: Data Integration - 2006 Budget Request \$164,399**

DCHS has a variety of data systems supporting its four divisions and the Director's Office. Through a business process analysis, this project will allow review of the existing data across divisions, analysis of its relationship to the DCHS Director's Office business needs, and development of methods to maximize the use of existing data to create management indicators for the Director's Office.

### Non-CX Funded Projects:

#### **DCHS: Veterans Information System - 2006 Budget Request \$118,975**

The project was initially funded in 2005 and will develop a replacement custom application for the current PROVET application. The database used by the Veterans Program is ten years old and has limited functionality. The 2006 budget request is for additional project funding needed to support the current project costs. Project goals include:

- Immediate availability for all program staff of intake information including required information on homeless clients. Availability of client mental health data in a HIPAA compliant format that can be provided to other mental health providers when needed.
- Availability of prior service and eligibility data to staff doing client intake and case management.
- Statistical tools to extract and process data without intensive manual effort.
- Ability to generate reports with basic client demographics and service information for program management and for DCHS performance reporting

## **2006 Facility Project Highlights**

### **Public Health Eastgate Lab Ventilation - 2006 Requested Budget \$29,090**

This project will install an exhaust ventilation hood in lab room D-12 at the Eastgate Public Health Center. The exhaust hood will utilize the existing building exhaust system from adjacent rooms

### **North Public Health Emergency Lighting - 2006 Requested Budget \$52,088**

This project will install emergency, battery back-up, exit pathway lighting in the North Public Health Center. This will ensure that staff and the public and staff can quickly exit the building in an emergency.